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## \*\* CONTINUING DATA \*\*\*\*\*

*None/m*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

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*yes/m*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/28/2004

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	JAPAN	DRAWING 14	20	3
Verified and Acknowledged	<i>Examiner's Signature</i>	Initials			

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## TITLE

Hologram retention method

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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